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ST COLETTA ALVERNO COTTAGE

W4955 HIGHWAY 18

JEFFERSON 53549 Phone: (920) 674-8349 Ownershi p: Nonprofit Church-Related Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: **FDDs** Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? Yes Number of Beds Set Up and Staffed (12/31/00): 76 Title 18 (Medicare) Certified? No

76

Total Licensed Bed Capacity (12/31/00): Number of Residents on 12/31/00: 71

Average Daily Census:

71

Services Provided to Non-Residents		Age, Sex, and Primary Diagr	osis of	Residents (12/3	1/00)	Length of Stay (12/31/00)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	9. 9
Supp. Home Care-Personal Care	Yes					1 - 4 Years	15. 5
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	73. 2	More Than 4 Years	74. 6
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	18. 3		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	8. 5		100. 0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	***************	******
Adult Day Health Care No P		Para-, Quadra-, Hemi plegi c	Full-Time Equivalen	qui val ent			
Congregate Meals No Cancer		Cancer	0.0			Nursing Staff per 100 Re	si dents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)	
Other Meals	Yes	Cardi ovascul ar	0.0	65 & 0ver	26. 8		
Transportation	Yes	Cerebrovascul ar	0.0			RNs	2. 5
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	2. 1
Other Services	No	Respi ratory	0.0			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	0.0	Male	42. 3	Aides & Orderlies	35. 3
Mentally Ill	No			Female	57.7		
Provi de Day Programming for	ĺ		100.0			[
Developmentally Disabled	Yes		a ala ala ala ala ala ala ala		100. 0		ale ale ale ale ale ale ale

Method of Reimbursement

		Medi c	are	N	Medic	ai d											
		(Title	18)	(1	Ti tl e	19)		0th	er	P	ri vate	Pay	1	Manage	d Care		Percent
			Per Die	m		Per Die	m		Per Die	m]	Per Dien	n]	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
	-			-			-			-			_				
Skilled Care	0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0. 00	0	0.0	\$0.00	0	0. 0	\$0. 00	0	0.0%
Intermediate				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Personal Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Residential Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Dev. Di sabl ed				65 10	00.0	\$143.50	0	0.0	\$0.00	6	100.0	\$160.00	0	0.0	\$0.00	71	100.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Total	0	0.0		65 10	00.0		0	0.0		6	100.0		0	0.0		71	100.0%

ST COLETTA ALVERNO COTTAGE

**********	*****	********	******	*****	*******	********	******
Admissions, Discharges, and		Percent Distribution	of Residents'	Condi t	ions, Services, a	nd Activities as of 12/	31/00
Deaths During Reporting Period							
					% Needi ng		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	27. 3	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	0.0	Bathi ng	0. 0		84. 5	15. 5	71
Other Nursing Homes	27. 3	Dressi ng	16. 9		67. 6	15. 5	71
Acute Care Hospitals	18. 2	Transferring	52 . 1		33. 8	14. 1	71
Psych. HospMR/DD Facilities	0.0	Toilet Use	50. 7		33. 8	15. 5	71
Rehabilitation Hospitals	0.0	Eati ng	54 . 9		28. 2	16. 9	71
Other Locations	27. 3	***************	******	*****	********	********	******
Total Number of Admissions	11	Continence		%	Special Treatmen	nts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	4. 2	Receiving Res	piratory Care	4. 2
Private Home/No Home Health	0.0	0cc/Freq. Incontinen	nt of Bladder	33.8	Recei vi ng Tra	cheostomy Care	0. 0
Private Home/With Home Health	0.0	0cc/Freq. Incontinen	nt of Bowel	26.8	Recei vi ng Suc	ti oni ng	4. 2
Other Nursing Homes	0.0				Receiving Ost	omy Care	0. 0
Acute Care Hospitals	0.0	Mobility			Recei vi ng Tub	e Feeding	4. 2
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	1.4	Receiving Mec	hanically Altered Diets	28. 2
Rehabilitation Hospitals	0.0						
Other Locations	33. 3	Skin Care			Other Resident	Characteri sti cs	
Deaths	66. 7	With Pressure Sores		1.4	Have Advance	Di recti ves	91. 5
Total Number of Discharges		With Rashes		5.6	Medi cati ons		
(Including Deaths)	12				Receiving Psy	choactive Drugs	29. 6
**********	*****	********	******	*****	*******	*********	******

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	Thi s		FDD		A11
	Facility	Fa	cilities	Fac	ilties
	%	%	Rati o	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	93. 4	85. 5	1. 09	84. 5	1. 11
Current Residents from In-County	18. 3	42. 1	0. 43	77. 5	0. 24
Admissions from In-County, Still Residing	9. 1	19. 5	0. 47	21. 5	0. 42
Admissions/Average Daily Census	15. 5	16. 4	0. 95	124. 3	0. 12
Discharges/Average Daily Census	16. 9	19. 2	0. 88	126. 1	0. 13
Discharges To Private Residence/Average Daily Census	0. 0	9. 2	0.00	49. 9	0.00
Residents Receiving Skilled Care	0. 0	0. 0	0.00	83. 3	0. 00
Residents Aged 65 and Older	26. 8	16. 2	1. 65	87. 7	0. 31
Title 19 (Medicaid) Funded Residents	91. 5	99. 5	0. 92	69. 0	1. 33
Private Pay Funded Residents	8. 5	0. 5	16. 73	22. 6	0. 37
Developmentally Disabled Residents	100. 0	99. 3	1.01	7. 6	13. 09
Mentally Ill Residents	0. 0	0. 5	0.00	33. 3	0. 00
General Medical Service Residents	0.0	0. 2	0.00	18. 4	0. 00
Impaired ADL (Mean)*	40. 3	50. 8	0. 79	49. 4	0. 82
Psychological Problems	29. 6	45. 9	0. 64	50. 1	0. 59
Nursing Care Required (Mean)*	6. 0	11.0	0. 54	7. 2	0. 84